

# SB 553 Nursing Facility Subgroup Executive Summary

March 16, 2017

To the SB 553 Working Group:

The attached SB 553 Nursing Facilities Subgroup Working Document is a consolidation of the ideas and recommendations of those participating in the subgroup proceedings. In attendance were representatives from Nursing Facilities, Wellsense, NH Health Families, NH DHHS, and community members. There has been no value or determination made on any of the recommendations. The subgroup members felt that all the ideas had merit. This remains a work in progress and needs more time with DHHS and MCOs. NF Providers strongly spoke to the highly regulated environment of a Nursing Facility and process to always promote the highest level of care and function for those in our care.

1. Providers must first operate under CMS rules.
2. There should be no added administrative burden on providers: Consistent practice, policies and tools among MCOs. The need for prior authorizations should be limited in scope and consistent between MCOs.
3. Rate Setting and eligibility should remain with DHHS.
4. Nursing Facility daily rates should be no less than current reimbursement and be reflective of allowable costs under Medicaid Rate Setting and Cost Reports. MCO overhead cost must not come out of payment pool for providers.
5. There should be additional rates or reimbursement for important services such as Dental Services (including extractions, restorations and dentures), Therapy (PT/OT/ST), and Hearing Aid replacement.
6. Atypical Facilities and Units must have viable rates to support programming.
7. Appropriate and reasonable procedures can assure smooth transitions between hospital-NF and NF-community.
8. There should be a Managed Care Ombudsman independent of Managed Care Organizations.

Lastly, there remain many unanswered questions in the minds of Nursing Facility providers about this conversion; chiefly there is no understanding of the perceived benefits of this conversion to Medicaid Care Management.

Respectfully,



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